



Inspiring Generations of Play

1375 Broadway • Suite 1001 • New York, NY 10018
t. 212.675.1141 • e. info@toyassociation.org

APPLICATION FOR MEMBERSHIP SERVICE PROVIDER

CORPORATE INFORMATION

Company Name	_____
Street Address	_____
City, State Zip	_____
Country	_____
Corporate Phone Number	_____
Website URL	_____

KEY CONTACT FOR THE TOY ASSOCIATION MEMBERSHIP

Name	_____	
Title	_____	
E-mail Address	_____	
Phone Number	Office _____	Mobile _____

MEMBERSHIP REQUIREMENTS

Our company will endeavor to adhere to [The Toy Association Member Code of Conduct](#).

COMPLETED BY: (print name) _____ **SIGNATURE** _____

ANNUAL DUES

CATEGORY	DUES
<input type="checkbox"/> Service Provider	\$1,750

PAYMENT INFORMATION

In accordance with the provisions of the Internal Revenue Code Section 6033(e), and due in part to the fact that The Toy Association engages in lobbying activities as defined in Section 162 (e) of the Code, 25% of the annual dues are non-deductible business expenses for Federal Income taxes. No portion of dues is deductible as a charitable contribution. Please consult your tax advisor for more detail.

CREDIT CARD AMEX, DISCOVER, MASTERCARD, VISA
Send completed application by email to bboyle@toyassociation.org

WIRE TRANSFER (international) or
ACH TRANSFER (domestic)

[VIEW INSTRUCTIONS](#)

Send completed application and confirmation of ACH/wire payment to bboyle@toyassociation.org.

CARD NUMBER	_____
EXPIRATION DATE	_____
CVV CODE	_____
CARDHOLDER NAME	_____



Inspiring Generations of Play

1375 Broadway • Suite 1001 • New York, NY 10018

t. 212.675.1141 • e. info@toyassociation.org

APPLICATION FOR MEMBERSHIP SERVICE PROVIDER

ADDITIONAL CONTACTS

The Toy Association offers information, resources, and services across all aspects of an organization, including a weekly e-newsletter (Toy News Tuesday). By providing contact information for others within the organization, The Toy Association will be able to direct targeted, value-added information applicable to specific job functions.

SUGGESTED CONTACTS TO PROVIDE: CEO, President, CFO/Finance, HR, Marketing, Sales, Quality Assurance/Safety

Name	_____	
Title	_____	
E-mail Address	_____	
Phone Number	Office _____	Mobile _____

Name	_____	
Title	_____	
E-mail Address	_____	
Phone Number	Office _____	Mobile _____

Name	_____	
Title	_____	
E-mail Address	_____	
Phone Number	Office _____	Mobile _____

Name	_____	
Title	_____	
E-mail Address	_____	
Phone Number	Office _____	Mobile _____

Name	_____	
Title	_____	
E-mail Address	_____	
Phone Number	Office _____	Mobile _____

Name	_____	
Title	_____	
E-mail Address	_____	
Phone Number	Office _____	Mobile _____

Name	_____	
Title	_____	
E-mail Address	_____	
Phone Number	Office _____	Mobile _____